STATEMENT OF ORGANIZA	ATION	OFFICE USE ONL
1. Name and Address of Committee Louisiana Society of Anethesiologists Political Action Committee, Inc. 2420 Athania Parkway, Ste 101 Metairie, LA 70001	2 Date of this Statement	PAC \$40 1/13 Rec # 80737
Check If: New Committee Monthly Filer	4. Amended Statement? YesNo	Rec # 80737
5. All Committee Officers and Directors (including Chairperson, Treasurer, a. Name b. Position Mack Thomas Chairperson Treasurer	if any, and any other committee of c. Address 244 Beverly Dr	
6. Affiliated Organizations (Any organization, other than a political committee, which directly or ind a. Name b. Address LOUISIANA Society OF Anethesiologists Metairie, 7. All Depositories for Committee Funds (committee funds must be deposed.)	ania PKwy, Sklo LA 70001	c. Relationship to Committee financial supporter
	ul Lane, Ste G ge, LA 70816	>
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Che Committee	eck one:Principal Camp	aign Committee Subsidiary
b. Name of Candidate		c. Office Sought by the Candidate
9. a. Name of Person Preparing Report Janna Pecque b. Daytime Telephone 504 - 841 - 0145	uet	
10. WE HEREBY CERTIFY that the information contained in this STATEMI and belief. This	1. 50	od correct to the best of our knowledge, information
Signature of Committee Treasurer, if any	Day	time Telephone Number